

**Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:** University of Wisconsin-Stout

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** UW System Board of Regents

**Address of Service Provider:** Menomonie, WI 54751

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** John K. Enger

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

225 Administration Building

UW-Stout

Menomonie, WI 54751

**Telephone Number of Designated Agent:** 715-232-2381

**Facsimile Number of Designated Agent:** 715-232-1399

**Email Address of Designated Agent:** engerj@uwstout.edu

**Signature of Officer or Representative of the Designating Service Provider:**

Date: 5/11/99

**Typed or Printed Name and Title:** John K. Enger

Director of University Relations

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee  
Made Payable to the Register of Copyrights.**

**RECEIVED**

**MAY 20 1999**

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